

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	11 21 00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	<i>LS</i>	<i>6430</i>	<i>1-2</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/21/02
2	✓	✓	5/11/03
3	✓	✓	10/21/02
4	✓	✓	10/21/02
5	✓	✓	10/21/02
6	✓	✓	10/21/02
7	✓	✓	10/21/02
8	✓	✓	10/21/02
9	✓	✓	10/21/02
10	✓	✓	10/21/02
11	✓	✓	10/21/02
12	✓	✓	10/21/02
13	✓	✓	10/21/02
14	✓	✓	10/21/02
15	✓	✓	10/21/02
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18	✓	✓	10/21/02
19	✓	✓	10/21/02
20	✓	✓	10/21/02
21	✓	✓	10/21/02
22	✓	✓	10/21/02
23	✓	✓	10/21/02
24	✓	✓	10/21/02
25	✓	✓	10/21/02
26	✓	✓	10/21/02
27	✓	✓	10/21/02
28	✓	✓	10/21/02
29	✓	✓	10/21/02
30	✓	✓	10/21/02
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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